

Tri-County Regional Vocational Technical High School



Respirator Policy

**Tri-County Regional Vocational Technical High School
Respiratory Protection Plan
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Statement of Philosophy

Successful education is an on-going, ever-changing learning process involving students, families, faculty, administrators and School Committee members, working together to provide a culture of excellence, responsibility, safety, and respect. This process fosters citizenship, social awareness, creativity, self-respect, and a desire to pursue further education.

Tri-County Regional Vocational Technical High School offers students opportunities for training and skill development that lead to rewarding employment, and provide a well-rounded education that inspires life-long learning. By developing students' abilities through diverse curricula, including a wide range of instructional settings, Tri-County strives to bring students to their highest potential in the attainment of academic and vocational-technical excellence.

Tri-County encourages students to engage in individual, group, and team activities by offering a variety of co-curricular and extra-curricular activities. In conjunction with the academic and vocational-technical curricula, these activities foster productive and responsible citizenship in today's technical society. To support this philosophy, Tri-County maintains the following goals:

- To ensure that students possess the ability to access information, demonstrate interpersonal skills, and use resources and technology.
- To promote literacy, critical-thinking, intellectual curiosity and life-long learning.
- To develop citizens who demonstrate social responsibility, responsible decision-making skills, a sound work ethic and a sense of community.
- To prepare students for entry into the workforce and/or the pursuit of post-secondary education.
- To encourage incoming students to explore various traditional and non-traditional areas.
- To integrate learning between academic and vocational areas.
- To provide a safe and cooperative learning environment for all students and staff.
- To provide cooperative education programs, adult education and extra-curricular activities.
- To promote parental involvement and communication.
- To provide meaningful opportunities for professional and staff development.
- To provide extensive student support services.

B. GOALS

1. The student as worker should possess the following abilities:

- **Accessing information** – acquiring, organizing and maintaining data as well as interpreting and communicating information.
- **Demonstrating interpersonal skills** – working as a member of a team, teaching and servicing others, collaborating, leading, negotiating, and working with people from culturally diverse backgrounds.
- **Using resources** – allocating time, money, materials, space and human resources.
- **Understanding systems** – operating within social, political, and organizational systems, monitoring and correcting performance, and designing or improving systems.
- **Using technology** – selecting and applying technologies to specific tasks including the use of computers and other emerging technologies to process information.

2. The student as lifelong learner should possess the following attributes:

- **Literacy** – reading, speaking, listening, writing, and mathematics.
- **Thinking** – the ability to think creatively and critically, make decisions, and solve problems.
- **Intellectual curiosity** – interest and enthusiasm for learning – scientific and technological literacy.
- **Versatility** – the ability to express oneself in more than one medium.

3. The student as a citizen should demonstrate:

- **The ability to make decisions** on ethical grounds through the analysis of the practical and ethical consequences of alternative decisions.
- **Personal qualities** including a sense of individual self-esteem and community responsibility, sociability, self-management, and integrity.
- **Social responsibility** – to understanding the consequences and effects of one's action.
- **A work ethic** – an understanding that work gives dignity and meaning to life as well as contributing to the good of the community.
- **Knowledge of cultures & languages** – understanding and appreciating different world cultures, languages and their interrelationships.
- **Citizenship** – being informed on public issues and voting – understanding the global economy.
- **A sense of community** – development of a desire to contribute one's time and effort to the good of the community.

Tri-County Regional Vocational Technical High School Respiratory Protection Program

I. OBJECTIVE

The Tri-County Regional Vocational Technical High School Respiratory Protection Program is designed to protect students and staff by establishing accepted practices for respirator use, providing guidelines for training and respirator selection, and explaining proper storage, use and care of respirators. This program also serves to help the Tri-County Regional Vocational Technical High School's staff and its students comply with Occupational Safety and Health Administration (OSHA) respiratory protection requirements as found in 29 CFR 1910.134.

II. ASSIGNMENT OF RESPONSIBILITY

A. Tri-County Regional Vocational Technical High School

Tri-County is responsible for providing respirators to students and staff when they are necessary for health protection. Tri-County Regional Vocational Technical High School's staff will provide respirators that are applicable and suitable for the intended purpose at no charge to students, unless the respirator has to be replaced due to loss or intentional damage.

B. Vocational Director

The Program Administrator for Tri-County Regional Vocational Technical High School is the Vocational Director. The Vocational Director is responsible for administering the respiratory protection program. Duties of the program administrator include:

1. Identifying work areas, process or tasks that require students and staff to wear respirators.
2. Evaluating hazards.
3. Selecting respiratory protection options.
4. Monitoring respirator use to ensure that respirators are used in accordance with their specifications.
5. Arranging for and/or conducting training.
6. Ensuring proper storage and maintenance of respiratory protection equipment.
7. Conducting quantitative fit testing with authorized test equipment.
8. Maintaining records required by the program.
9. Evaluating the program.
10. Updating written program, as needed.

C. Vocational and Technical Teachers

Vocational and technical teachers are responsible for ensuring that the respiratory protection program is implemented in their particular areas. In addition to being knowledgeable about the program requirements for their own protection, vocational and technical teachers must also ensure that the program is understood and followed by the students under their charge. Duties of the vocational and technical teachers include:

1. Ensuring that students under their supervision receive appropriate training, fit testing, and annual medical evaluation.

2. Ensuring the availability of appropriate respirators and accessories.
3. Being aware of tasks requiring the use of respiratory protection.
4. Enforcing the proper use of respiratory protection when necessary.
5. Ensuring that respirators are properly cleaned, maintained, and stored according to this program.
6. Ensuring that respirators fit well and do not cause discomfort.
7. Continually monitoring work areas and operations to identify respiratory hazards.
8. Coordinating with the Vocational Director on how to address respiratory hazards or other concerns regarding this program.

D. Students

Each student is responsible for wearing his or her respirator when and where required and in the manner in which they are trained. Students must also:

1. Care for and maintain their respirators as instructed, guard them against damage, and store them in a clean, sanitary location.
2. Inform the teacher if their respirator no longer fits well, and request a new one that fits properly.
3. Inform the teacher if the respirator becomes damaged or needs a new cartridge.
4. Inform the teacher of any respiratory hazards that they feel are not adequately addressed in the workplace and of any other concerns that they have regarding this program.
5. Use the respiratory protection in accordance with the manufacturer's instructions and the training received.

III. APPLICABILITY

This program applies to all students and staff who are required to wear respirators in performing certain shop projects or assignments.

Students or staff who voluntarily wear filtering face pieces (dust masks) are not subject to the medical evaluation, cleaning, storage, and maintenance provisions of this program.

IV. PROGRAM

A. Hazard Assessment and Respirator Selection

The Teacher will select respirators to be used on site, based on the hazards to which students are exposed and in accordance with the OSHA Respiratory Protection Standard. The teacher will conduct a hazard evaluation for each assigned task or work area where airborne contaminants may be present in routine operations. A log of identified hazards will be maintained by the "Vocational Director", Attachment B). The hazard evaluations shall include:

1. Identification and development of a list of hazardous substances used in the shop areas by department or work process.
2. Review of work processes to determine where potential exposures to hazardous substances may occur. This review shall be conducted by surveying the workplace, reviewing the process records, and talking with teachers.
3. Exposure monitoring to quantify potential hazardous exposures.

The proper type of respirator for the specific hazard involved will be selected in accordance with the manufacturer's instructions. A list of students and appropriate respiratory protection will be maintained by the Vocational Director and the School Nurse (see Attachment C).

B. Updating the Hazard Assessment

The Vocational Director and teacher must revise and update the hazard assessment as needed (i.e., any time work process changes may potentially affect exposure or whenever there is a change in the materials used). The Vocational Director and department teachers will evaluate the potential hazard on a continuous basis. If it is determined that respiratory protection is necessary, all other elements of the respiratory protection program will be in effect for those tasks, and the respiratory program will be updated accordingly.

C. Training

The Vocational Director will provide training to respirator users and their teachers on the contents of the Tri-County Regional Vocational Technical High School Respiratory Protection Program and their responsibilities under it, and on the OSHA Respiratory Protection Standard. All affected students and their teachers will be trained prior to using a respirator in their specific programs. Teachers will also be trained prior to supervising students that must wear respirators.

The training course will cover the following topics:

1. The Tri-County Regional Vocational Technical High School Respiratory Protection Program;
2. The OSHA Respiratory Protection Standard (29 CFR 1910.134);
3. Respiratory hazards encountered at Tri-County Regional Vocational Technical High School and their health affects;
4. Proper selection and use of respirators;
5. Limitations of respirators;
6. Respirator donning and user seal (fit) checks;
7. Fit testing;
8. Emergency use procedures;
9. Maintenance and storage; and
10. Medical signs and symptoms limiting the effective use of respirators.

Students will be retrained annually or as needed (e.g., if they change departments and need to use a different respirator). Students must demonstrate their understanding of the topics covered in the training through hands-on exercises and a written test. Respirator training will be documented by the Vocational Director and the documentation will include the type, model, and size of respirator for which each student has been trained and fit tested.

D. NIOSH Certification

All respirators must be certified by the National Institute for Occupational Safety and Health (NIOSH) and shall be used in accordance with the terms of that certification. Also, all filters, cartridges, and canisters must be labeled with the appropriate NIOSH approval label. The label must not be removed or defaced while the respirator is in use.

E. Medical Evaluation

Students, who are required to wear respirators, must pass a medical evaluation provided by Tri-County Regional Vocational Technical High School Nurse before being permitted to wear a respirator in their shop area. Any student refusing to complete the medical evaluation will not be allowed to work in an area requiring respirator use.

The school nurse will provide the medical evaluations. Medical evaluation procedures are as follows:

1. The medical evaluation will be conducted using the questionnaire provided in Appendix E of the OSHA Respiratory Protection Standard. The Vocational Director will provide a copy of this questionnaire to all students requiring medical evaluations.
2. All affected students will be given a copy of the medical questionnaire to complete and have signed by their parents or guardian.
3. All students will be granted the opportunity to speak with the school nurse and or medical care provider if applicable about their medical evaluation, if they so request.
4. The Vocational Director/teacher shall provide the evaluating nurse with a copy of this Program, a copy of the OSHA Respiratory Protection Standard, the list of hazardous substances by vocational department, and the following information about each student requiring evaluation:
 - a. his or her department;
 - b. proposed respirator type and weight;
 - c. length of time required to wear respirator;
 - d. expected physical work load (light, moderate or heavy);
 - e. potential temperature and humidity extremes; and
 - f. any additional protective clothing required.
5. Positive pressure air purifying respirators will be provided to students as required by medical necessity.
6. Additional medical evaluations will be required under the following circumstances:
 - a. The student reports signs and/or symptoms related to their ability to use the respirator, such as shortness of breath, dizziness, chest pains or wheezing.
 - b. The evaluating nurse informs the program teacher that the student needs to be reevaluated.
 - c. Information found during the implementation of this program, including observations made during the fit testing and program evaluation, indicates a need for reevaluation.

All evaluations will remain confidential between the student and the school nurse.

Note - - If questions or concerns arise during the initial evaluation then the nurse will require the student's parents to attain a physical exam and or medical clearance approving respirator use from their primary care physician or health care provider. Failure to provide medical clearance will result in the student being excluded from a shop that requires the use of a respirator.

F. Fit Testing

Students who are required to wear half-face piece APRs will be fit tested:

1. Prior to being allowed to wear any respirator with a tight-fitting face piece.
2. When there are changes in the student's physical condition that could affect respiratory fit (e.g., obvious change in body weight, facial scarring, etc.).

Students will be fit tested with the make, model, and size of respirator that they will actually wear. Students will be provided with several sizes of respirators so that they may find an optimal fit. Fit testing of powered air purifying respirators will be conducted in the negative pressure mode.

Fit tests will be conducted in accordance with the OSHA Respiratory Protection Standard. No student will be fit tested unless clean shaven. (Fit test result cannot be guaranteed if there is facial hair).

G. General Respirator Use Procedures

1. Students will use their respirators under conditions specified in this program, and in accordance with the training they receive on the use of each particular model. In addition, the respirator shall not be used in a manner for which it is not certified by NIOSH or by its manufacturer.
2. All students shall conduct user seal checks each time they wear their respirators. Students shall use either the positive or negative pressure check (depending on which test works best for them) as specified in the OSHA Respiratory Protection Standard.
 - a. **Positive Pressure Test:** This test is performed by closing off the exhalation valve with your hand. Breathe air into the mask. The face fit is satisfactory if some pressure can be built up inside the mask without any air leaking out between the mask and the face of the wearer.
 - b. **Negative Pressure Test:** This test is performed by closing of the inlet openings of the cartridge with the palm of your hand. Some masks may require that the filter holder be removed to seal off the intake valve. Inhale gently so that a vacuum occurs within the face piece. Hold your breath for ten (10) seconds. If the vacuum remains, and no inward leakage is detected, the respirator is fit properly.
3. All students shall be permitted to leave the work area to go to the locker room to maintain their respirator for the following reasons:
 - a. to clean their respirator if it is impeding their ability to work;
 - b. to change filters or cartridges;
 - c. to replace parts; or
 - d. to inspect respirator if it stops functioning as intended.

Students should notify their teacher before leaving the area.

4. Students are not permitted to wear tight-fitting respirators if they have any condition, such as facial scars, facial hair, or missing dentures that would prevent a proper seal. Students are not permitted to wear headphones, jewelry, or other items that may interfere with the seal between the face and the face piece. Students are required to be clean shaven whenever respirators are worn.
5. Before and after each use of a respirator, a student or shop teacher must make an inspection of tightness or connections and the condition of the face piece, headbands, valves, filter holders and filters. Questionable items must be addressed immediately by the teacher and/or Vocational Director.

H. Air Quality

For supplied-air respirators, only Grade D breathing air shall be used in the cylinders. The Vocational Director will coordinate deliveries of compressed air with the company's vendor and will require the vendor to certify that the air in the cylinders meets the specifications of Grade D breathing air.

The shop teacher will maintain a minimum air supply of one fully charged replacement cylinder for each SAR unit. In addition, cylinders may be recharged as necessary from the breathing air cascade system located near the respirator storage area.

I. Replacement Schedules

Respirator cartridges shall be replaced as determined by the Vocational Director, teachers(s), and manufacturers recommendations. If a student notices an odor while wearing organic vapor cartridges or if there is excessive breathing resistance noted while wearing a particulate respirator, it may indicate that the cartridge or filter needs to be changed.

J. Cleaning

Respirators are to be regularly cleaned and disinfected at the designated respirator cleaning station. Respirators issued for the exclusive use of an employee shall be cleaned as often as necessary. Atmosphere-supplying and emergency use respirators are to be cleaned and disinfected after each use.

The following procedure is to be used when cleaning and disinfecting reusable respirators:

1. Disassemble respirator, removing any filters, canisters, or cartridges.
2. Wash the face piece and all associated parts (except cartridges and elastic headbands) in an approved cleaner-disinfectant solution in warm water (about 120 degrees Fahrenheit). Do not use organic solvents. Use a hand brush to remove dirt.
3. Rinse completely in clean, warm water.
4. Disinfect all facial contact areas by spraying the respirator with an approved disinfectant.
5. Air dry in a clean area.
6. Reassemble the respirator and replace any defective parts. Insert new filters or cartridges and make sure the seal is tight.
7. Place respirator in a clean, dry plastic bag or other airtight container.

The shop teacher will ensure an adequate supply of appropriate cleaning and disinfection materials at the cleaning station.

K. Maintenance

Respirators are to be properly maintained at all times in order to ensure that they function properly and protect students adequately. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts will be replaced prior to use. No components will be replaced or repairs made beyond those recommended by the manufacturer. Repairs to regulators or alarms of atmosphere-supplying respirators will be conducted by the manufacturer.

1. All respirators shall be inspected routinely before and after each use.
2. The Respirator Inspection Checklist (Attachment D) will be used when inspecting respirators.
3. A record shall be kept of inspection dates and findings for respirators maintained for emergency use.
4. Students are permitted to leave their work area to perform limited maintenance on their respirator in a designated area that is free of respiratory hazards. Situations when this is permitted include:
 - a. washing face and respirator face piece to prevent any eye or skin irritation;
 - b. replacing the filter, cartridge or canister;
 - c. detection of vapor or gas breakthrough or leakage in the face piece; or
 - d. detection of any other damage to the respirator or its components.

L. Storage

After inspection, cleaning, and necessary repairs, respirators shall be stored appropriately to protect against dust, sunlight, heat, extreme cold, excessive moisture, or damaging chemicals.

1. Respirators must be stored in a clean, dry area, and in accordance with the manufacturer's recommendations. Each student will clean and inspect their own air-purifying respirator in accordance with the provisions of this program, and will store their respirator in a plastic bag in the designated area. Each student will have his/her name on the bag and that bag will only be used to store that student's respirator.
2. Respirators shall be packed or stored so that the face piece and exhalation valve will rest in a near normal position.
3. Respirators shall not be placed in places such as lockers or toolboxes unless they are in carrying cartons.
4. Respirators maintained at stations and work areas for emergency use shall be stored in compartments built specifically for that purpose, be quickly accessible at all times, and be clearly marked.

5. The vocational/technical teacher will store Tri-County's supply of respirators and respirator components in their original manufacturer's packaging in a designated area located in their vocational program office.

M. Respirator Malfunctions and Defects

1. For any malfunction of an ASR (atmosphere-supplying respirator), such as breakthrough, face piece leakage, or improperly working valve, the respirator wearer should inform his/her teacher that the respirator no longer functions as intended, and go to the designated safe area to maintain the respirator. The teacher must ensure that the student either receives the needed parts to repair the respirator or is provided with a new respirator.

All students wearing atmosphere-supplying respirators will work with a buddy. The teacher shall develop and inform students of the procedures to be used when a buddy is required to assist another student who experiences an ASR malfunction.

2. Respirators that are defective or have defective parts shall be taken out of service immediately. If, during an inspection, a student discovers a defect in a respirator, he/she is to bring the defect to the attention of his/her teacher. Teacher will give all defective respirators to the Vocational Director. The teacher/vocational director will decide whether to:
 - a. Temporarily take the respirator out of service until it can be repaired;
 - b. Perform a simple fix on the spot, such as replacing a head strap; or
 - c. Dispose of the respirator due to an irreparable problem or defect.

When a respirator is taken out of service for an extended period of time, the respirator will be tagged out of service, and the student will be given a replacement of a similar make, model, and size. All tagged out respirators will be kept in the vocational/technical teacher's office.

N. Program Evaluation

The Vocational Director will conduct periodic evaluations of the Vocational Programs work area to ensure that the provisions of this program are being implemented. The evaluations will include regular consultations with students who use respirators and their teachers, site inspections, air monitoring and a review of records. Items to be considered will include:

1. Comfort;
2. Ability to breathe without objectionable effort;
3. Adequate visibility under all conditions
4. Provisions for wearing prescription glasses;
5. Ability to perform all tasks without undue interference; and
6. Confidence in the face piece fit.

Identified problems will be noted in an inspection log and addressed by the Vocational Director. These findings will be reported to Tri-County Regional Vocational Technical High School Principal, and the report will list

plans to correct deficiencies in the respirator program and target dates for the implementation of those corrections.

O. Documentation and Recordkeeping

1. A written copy of this program and the OSHA Respiratory Protection Standard shall be kept in the Vocational Directors office and made available to all students who wish to review it.
2. Copies of training and fit test records shall be maintained by the Vocational Director/Nurse. These records will be updated as new students are trained, as existing students receive refresher training, and as new fit tests are conducted
3. For students covered under the Respirator Policy, the Nurse shall maintain copies of the medical evaluation regarding each student's ability to wear a respirator. The completed medical questionnaires and evaluating nurse's documented findings will remain confidential.
4. The completed fit test report shall be kept in the student's medical file and updated annually.

ATTACHMENT A

Record of Respirator Use

Required and Voluntary Respirator Use at Tri-county Regional Vocational Technical High School	
Type of Respirator	Department/Process

ATTACHMENT B

Hazard Evaluation

Process Hazard Evaluation for Tri-County Regional Vocational Technical High School 2017-2018	
Process	Noted Hazards
Prep-sanding	Ventilation controls on some sanders are in place, but students continue to be exposed to respirable wood dust at 2.5 - 7.0 mg/m ³ (8 hour time-weighted-average, or TWA). Half-face piece APRs with P100 filters and goggles are required for employees sanding wood pieces. PAPRs will be available for employees who are unable to wear an APR.
Prep-cleaning	Average methylene chloride exposures measured at 70 ppm based on 8-hour TWA exposure results for student cleaning and stripping furniture pieces. Ventilation controls are planned, but will not be implemented until designs are completed and a contract has been let for installation of the controls. In the meantime, students must wear supplied air hoods with continuous airflow, as required by the Methylene Chloride Standard 1910.1052.
Assembly	Ventilation controls on sanders are in place, but students continue to be exposed to respirable wood dust at 2.5 - 6.0 mg/m ³ (8 hour TWA); half-face piece APRs with P100 filters and goggles are required for employees sanding wood pieces in the assembly department. PAPRs will be available for students who are unable to wear an APR. The substitution for aqueous-based glues will eliminate exposures to formaldehyde, methylene chloride, and epoxy resins.
Maintenance	Because of potential IDLH conditions, students cleaning dip coat tanks must wear a pressure demand SAR during the performance of this task.
Cleaning Spray Booth Walls	Students will wear half-face piece APRs with P100 cartridges. Although exposure monitoring has shown that exposures are kept within PELs during this procedure, Tri-County Regional Vocational Technical High School will provide respirators to students who are concerned about potential exposures
Loading Coating Agents into Supply Systems	Students will wear half-face piece APRs with organic vapor cartridges. Although exposure monitoring has shown that exposures are kept within PELs during this procedure Tri-County Regional Vocational Technical High School will provide respirators to students who are concerned about potential exposures
Changing Booth Filters	Students will wear half-face piece APRs with P100 cartridges. Although exposure monitoring has shown that exposures are kept within PELs during this procedure, Tri-County Regional Vocational Technical High School will provide respirators to students when concerned about potential exposures

ATTACHMENT C

Record of Respirator Issuance

Tri-County Regional Vocational Technical High School Students in Respiratory Protection Program 2017-2018				
Respiratory protection is required for and has been issued to the following students:				
Name	Department	Job Description/ Work Procedure	Type of Respirator	Date Issued

ATTACHMENT D

Respirator Inspection Checklist

Type of Respirator:	Location:
Respirator Issued to:	Type of Hazard:
Face piece	<input type="checkbox"/> Cracks, tears, or holes <input type="checkbox"/> Face mask distortion <input type="checkbox"/> Cracked or loose lenses/face shield
Head straps	<input type="checkbox"/> Breaks or tears <input type="checkbox"/> Broken buckles
Valves:	<input type="checkbox"/> Residue or dirt <input type="checkbox"/> Cracks or tears in valve material
Filters/Cartridges:	<input type="checkbox"/> Approval designation <input type="checkbox"/> Gaskets <input type="checkbox"/> Cracks or dents in housing <input type="checkbox"/> Proper cartridge for hazard
Air Supply Systems	<input type="checkbox"/> Breathing air quality/grade <input type="checkbox"/> Condition of supply hoses <input type="checkbox"/> Hose connections <input type="checkbox"/> Settings on regulators and valves
Rubber/Elastomer Parts	<input type="checkbox"/> Pliability <input type="checkbox"/> Deterioration

Inspected by:	Date:
Action Taken:	

E. OSHA RESPIRATOR MEDICAL QUESTIONNAIRE

Appendix C to Sec. 1910.134: OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

To: Students and Parents

Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination. Students must answer this questionnaire in the company of their parents/guardian. Parents and Students must sign in the appropriate location at the end of this questionnaire

Part A. Section 1. (Mandatory) The following information must be provided by every student who has been selected to use any type of respirator (please print).

1. Today's date: _____

2. Your name: _____

3. Your age (to nearest year): _____

4. Sex (circle one): Male/Female

5. Your height: _____ ft. _____ in.

6. Your weight: _____ lbs.

7. Vocational area: _____

8. A phone number where you can be reached by the health care professional who reviews this questionnaire (include the Area Code): _____

9. The best time to phone you at this number: _____

10. Check the type of respirator you will use (you can check more than one category):

a. _____ N, R, or P disposable respirator (filter-mask, non- cartridge type only).

b. _____ Other type (for example, half- or full-face piece type, powered-air purifying, supplied-air, self-contained breathing apparatus).

11. Have you worn a respirator (circle one): Yes/No

If "yes," what type(s): _____

Part A. Section 2. (Mandatory) Questions 1 through 9 below must be answered by every student who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you **currently** smoke tobacco, or have you smoked tobacco in the last month: Yes/No

2. Have you **ever had** any of the following conditions?

- a. Seizures (fits): Yes/No
- b. Diabetes (sugar disease): Yes/No
- c. Allergic reactions that interfere with your breathing: Yes/No
- d. Claustrophobia (fear of closed-in places): Yes/No
- e. Trouble smelling odors: Yes/No

3. Have you **ever had** any of the following pulmonary or lung problems?

- a. Asbestosis: Yes/No
- b. Asthma: Yes/No
- c. Chronic bronchitis: Yes/No
- d. Emphysema: Yes/No
- e. Pneumonia: Yes/No
- f. Tuberculosis: Yes/No
- g. Silicosis: Yes/No
- h. Pneumothorax (collapsed lung): Yes/No
- i. Lung cancer: Yes/No
- j. Broken ribs: Yes/No
- k. Any chest injuries or surgeries: Yes/No
- l. Any other lung problem that you've been told about: Yes/No

4. Do you **currently** have any of the following symptoms of pulmonary or lung illness?

- a. Shortness of breath: Yes/No
- b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes/No
- c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes/No
- d. Have to stop for breath when walking at your own pace on level ground: Yes/No
- e. Shortness of breath when washing or dressing yourself: Yes/No
- f. Shortness of breath that interferes with your job: Yes/No
- g. Coughing that produces phlegm (thick sputum): Yes/No
- h. Coughing that wakes you early in the morning: Yes/No
- i. Coughing that occurs mostly when you are lying down: Yes/No
- j. Coughing up blood in the last month: Yes/No
- k. Wheezing: Yes/No
- l. Wheezing that interferes with your job: Yes/No
- m. Chest pain when you breathe deeply: Yes/No
- n. Any other symptoms that you think may be related to lung problems: Yes/No

5. Have you **ever had** any of the following cardiovascular or heart problems?

- a. Heart attack: Yes/No
- b. Stroke: Yes/No
- c. Angina: Yes/No
- d. Heart failure: Yes/No
- e. Swelling in your legs or feet (not caused by walking): Yes/No
- f. Heart arrhythmia (heart beating irregularly): Yes/No
- g. High blood pressure: Yes/No
- h. Any other heart problem that you've been told about: Yes/No

6. Have you **ever had** any of the following cardiovascular or heart symptoms?

- a. Frequent pain or tightness in your chest: Yes/No
- b. Pain or tightness in your chest during physical activity: Yes/No
- c. Pain or tightness in your chest that interferes with your job: Yes/No
- d. In the past two years, have you noticed your heart skipping or missing a beat: Yes/No
- e. Heartburn or indigestion that is not related to eating: Yes/ No
- f. Any other symptoms that you think may be related to heart or circulation problems: Yes/No

7. Do you **currently** take medication for any of the following problems?

- a. Breathing or lung problems: Yes/No
- b. Heart trouble: Yes/No
- c. Blood pressure: Yes/No
- d. Seizures (fits): Yes/No

8. If you've used a respirator, have you **ever had** any of the following problems? (If you've never used a respirator, check the following space and go to question 9 :)

- a. Eye irritation: Yes/No
- b. Skin allergies or rashes: Yes/No
- c. Anxiety: Yes/No
- d. General weakness or fatigue: Yes/No
- e. Any other problem that interferes with your use of a respirator: Yes/No

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes/No

10. Have you **ever lost** vision in either eye (temporarily or permanently): Yes/No

11. Do you **currently** have any of the following vision problems?

Wear contact lenses: Yes/No

- a. Wear glasses: Yes/No
- b. Color blind: Yes/No
- c. Any other eye or vision problem: Yes/No

12. Have you **ever had** an injury to your ears, including a broken ear drum: Yes/No

13. Do you **currently** have any of the following hearing problems?

- a. Difficulty hearing: Yes/No
- b. Wear a hearing aid: Yes/No
- c. Any other hearing or ear problem: Yes/No

14. Have you **ever had** a back injury: Yes/No

15. Do you **currently** have any of the following musculoskeletal problems?

- a. Weakness in any of your arms, hands, legs, or feet: Yes/No
- b. Back pain: Yes/No
- c. Difficulty fully moving your arms and legs: Yes/No
- d. Pain or stiffness when you lean forward or backward at the waist: Yes/No
- e. Difficulty fully moving your head up or down: Yes/No
- f. Difficulty fully moving your head side to side: Yes/No
- g. Difficulty bending at your knees: Yes/No
- h. Difficulty squatting to the ground: Yes/No
- i. Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes/No
- j. Any other muscle or skeletal problem that interferes with using a respirator: Yes/No

16. At school, work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals: Yes/No

If "yes," name the chemicals if you know them: _____

17. Have you ever worked with any of the materials, or under any of the conditions, listed below:

- a. Asbestos: Yes/No
- b. Silica (**e.g.**, in sandblasting): Yes/No
- c. Tungsten/cobalt (e.g., grinding or welding this material): Yes/No
- d. Beryllium: Yes/No
- e. Aluminum: Yes/No
- f. Coal (for example, mining): Yes/No
- g. Iron: Yes/No
- h. Tin: Yes/No
- i. Dusty environments: Yes/No
- j. Any other hazardous exposures: Yes/No

If "yes," describe these exposures: _____

18. List any part-time jobs or side businesses you have: _____

19. List your current and previous hobbies: _____

20. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes/No

If "yes," name the medications if you know them: _____

21. Will you be using any of the following items with your respirator(s)?

- a. HEPA Filters: Yes/No
- b. Canisters (for example, gas masks): Yes/No
- c. Cartridges: Yes/No

22. How often are you expected to use the respirator(s) (circle "yes" or "no" for all answers that apply to you)?

- a. Escape only (no rescue): Yes/No
- b. Emergency rescue only: Yes/No
- c. Less than 5 hours **per week**: Yes/No
- d. Less than 2 hours **per day**: Yes/No
- e. 2 to 4 hours per day: Yes/No
- f. Over 4 hours per day: Yes/No

23. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: Yes/No

If "yes," describe this protective clothing and/or equipment: _____

24. Will you be working under hot conditions (temperature exceeding 77 deg. F): Yes/No

25. Will you be working under humid conditions: Yes/No

26. Describe the work you'll be doing while you're using your respirator(s):

27. Describe any special or hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases):

28. Provide the following information, if you know it, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of the first toxic substance: _____
Estimated maximum exposure level: _____
Duration of exposure: _____
Name of the second toxic substance: _____
Estimated maximum exposure: _____
Duration of exposure: _____
Name of the third toxic substance: _____
Estimated maximum exposure level: _____
Duration of exposure: _____
The name of any other toxic substances that you'll be exposed to while using your respirator: _____

“I HEREBY STATE THAT TO THE BEST OF MY KNOWLEDGE, MY ANSWERS TO THE ABOVE QUESTIONS ARE COMPLETE AND CORRECT. “

Signature of Student: _____ Signature of Parent/Guardian: _____ Date: _____

F. QUANTITATIVE RESPIRATOR FIT TEST FORM

Student Name: _____ Date: _____

Grade: _____ Vocational Program: _____

RESPIRATOR TESTED

Type: _____ Brand: _____ Size: _____ Model #: _____

TEST EXERCISES:

Positive Pressure fit check: _____ Pass _____ Fail

Negative Pressure fit check: _____ Pass _____ Fail

1. Head Stationary Normal Breathing (60 seconds) _____ Pass _____ Fail

2. Head Stationary Deep Breathing (60 seconds) _____ Pass _____ Fail

3. Head Turning Side to Side Breathing (60 seconds) _____ Pass _____ Fail

4. Head Moving Up and Down Breathing (60 seconds) _____ Pass _____ Fail

5. Talking (count backwards 1 – 10) _____ Pass _____ Fail

6. Grimace (15 seconds) _____ Pass _____ Fail

7. Bending over To Touch Toes (60 seconds) _____ Pass _____ Fail

8. Head Stationary Normal Breathing (60 seconds) _____ Pass _____ Fail

Pass: _____ Fail: _____

Name of Tester: _____